

**MONTANA LIMITED LIABILITY
COMPANY ANNUAL REPORT**



Prepare, sign, submit with an original signature and filing fee.

MAIL: **LINDA McCULLOCH**
Secretary of State
P.O. Box 202802
Helena Montana 59620-2802

PHONE: (406)444-3665
FAX: (406)444-3976
WEB SITE: sos.mt.gov

This is the minimum information required
(This space for Secretary of State use only)

Must be returned in order for your limited liability company to remain active and in good standing and prevent involuntary dissolution/revocation per [35-8-208, MCA](#).

Filing Fee on or before April 15th: \$15.00
After April 15th: \$30.00

- ☐ **24 Hour Priority Filing Add \$20.00**
☐ **1 Hour Expedite Filing Add \$100.00**

To help you determine what information is on file with this office, please call the above phone number or use our business entity search at <http://app.mt.gov/bes>.

Exact Name of Limited Liability Company: _____

Registered Agent Information	
Name of Registered Agent: _____	Phone (Optional): _____
Street Address: _____ City: _____, MT Zip: _____ (or Physical Location)	
Mailing Address/PO Box*: _____	City: _____, MT Zip: _____
*Complete if mailing address is different from street address or physical location and both addresses must be in Montana.	
Optional: Phone: _____	E-Mail Address (Optional): _____
Signature of New Registered Agent (required if changed): _____	

1. State of Organization: _____
2. Address of Principal Office in state of organization: _____
3. Limited liability company is managed by: ☐Managers or ☐Members. Please check either box. (This information must agree with our records).
4. Names and addresses with street name and number of Managers or Members (to REMOVE managers or members see [below](#)):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

5. **Professional Limited Liability Companies only.** I certify that all the members and not less than one-half of the managers are qualified with the proper licensing authority in Montana or meet higher standards as specified by that licensing authority.
6. By my signature below, I, am authorized to execute documents on behalf of the LLC, and do state that any and all statements contained herein are true and are based upon actions taken by the LLC in accordance with the statutes or its articles of organization or operating agreement.

I further state that the LLC remains in existence and has taken the necessary actions during the past year to preserve the status.

Authorized Signature

Printed name of signing Individual

Date (Mo/Day/Year)

INSTRUCTIONS FOR REMOVING MEMBERS OR MANAGERS

DOMESTIC:

- **Statement of Dissociation** - The only time you need to file a Statement of Dissociation is when a member has dissociated (withdrawn) from the limited liability company. Prepare a Statement of Dissociation to remove each member. The Statement of Dissociation must state the name of the LLC and the name of the specific member that is being dissociated from the LLC. The Statement of Dissociation can be signed by the specific member being removed or by one of the other listed members. The filing fee is \$15.00 per Statement of Dissociation.
- **Managed by Members** - If a member is no longer managing the LLC but remains a member, a Statement of Dissociation is NOT required. Simply do not list their name as a manager.
- **Managed by Managers** - If a manager is no longer managing the LLC and is not a member, a Statement of Dissociation is NOT required. Simply do not list their name as a manager.

FOREIGN:

Managed by Members or Managers - Members or managers can be removed from the annual report without any requirements. Simply do not list their name as a manager.